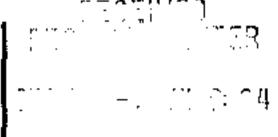
FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee



			FUI	Other	IIIan A	an Authonized	1 COUNTY	ICIGO			Office	Use Dnily	
1.	NAME OF COMMITT	F TEE (in full)	TYI	PE OR I	PRINT ♥		ample: If ty or the lines		pe	12FE	4 M 5		
L			. <u> </u>	Life	And Lil	berty PAC					<u> </u>		
<u> </u>	·							,,			·		
ΑD	DRESS (nu	umber and street)	L	2400	Earlsga	ate Court	<u> </u>				<u> </u>		
-	•	ck if different	L	<u>. </u>			i_		.			 _	
		previously rted. (ACC)		Resto	n	i				Ľ V A	2019	1	- [
2.	FEC IDE	ENTIFICATION N	IUME	3ER ▼	-	CITY ▲				STATE A	·	ZIP CC	DE 4
	C 00	0229385				3. IS THIS REPORT	x	NEW (N)	OR		AMENDED (A))	
4.	(Choose C	OF REPORT		(b) Mon Rep Due	-	Feb 20 (M2)	ı	May 2	0 (M5)		Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Civity)
	(a) Quar	terly Reports:		-	· · ·	Mar 20 (M3)	,	Jun 20	0 (M6)		Sep 20 (M9))	Dec. 20 (M12) (Non-Election Year (Inly)
		April 15	~~ 4\			Apr 20 (M4)	ı	Jul 20	(M7)		Oct 20 (M10	•)	Jan 31 (YE)
		July 15		(c)	12-Day PRE-Elec	ction	Primary (12P)		Gen	neral (12G)		Runoff (12R)
		Quarterly Report (October 15			Report fo		Conventio	ın (12C)		Spe	cial (12S)		
		Quarterly Report (January 31 Year-End Report (Election on						in the State	of
		July 31 Mid-Year Report (Non-electi Year Only) (MY)	ion	(d)	30-Day POST-El		General ((30G)		Run	noff (30R)		Special (30S)
		Termination Repor	rŧ		Report (c	or the:						in the	
						Election on						State	of
5.	Covering	Period C	ì	0	1 .	2007	throug	jh	03	31	1 20	07	
Typ Sig	pe or Print	have examined to Name of Treasure Treasurer	er /	Willi	am L. C	Constantine,	CPA - A	Assista	nt Tre	easurer Data	04	02	2007 u.s.c. §4379.
	Offic Us			ļ	1	}	:						RM 3X
1	Ont			1		1	4				'	(Rev. 02/2	(003)

CO

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

	Li	ife And Liberty P.	AC		··,					
Re	port	Covering the Period:	From:	01	01	2007	To:	03	31	2007
			<u></u>		<u> </u>	COLUMN A This Period			COLUMN Idar Year-1	
	(a)	Cash on Hand January 1,	2007							1.093 18
		Cash on Hand at Beginning of Reporting	g Period		,	1,093	18			
	(c)	Total Receipts (from L	.ine 19)		•	, 0	00			0,00
		Subtotal (add Lines 6) 6(c) for Column A and 6(a) and 6(c) for Colu	d Lines		,	1.093	18			1.093 18
	Total	l Disbursements (from	Line 31)	-		115	00		,	115 00
	Repo	n on Hand at Close of orting Period tract Line 7 from Line				978	18			978_18
	the (ts and Obligations Owi Committee (Itemize all edule C and/or Schedu	Q FI	-		. 0	00			
	the (ts and Obligations Ow Committee (Itemize all edule C and/or Schedu	oh	•		, 0	00			

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100 (T)

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
Life And Liberty PAC

Report	Covering the Period: From:	01	01	2007		To:	03	31	2007	
	I. Receipts		T	COLUMN otal This Pe			COLUMN B Calendar Year-to-Date			
	tributions (other than loans) From:								•	
(8)	individuals/Persons Other									
	Than Political Committees				0	00				
	(i) Itemized (use Schedule A)		•	•	٠.					
	(li) Unitemized									
	(iii) TOTAL (add				^	00			0 00	
	Lines 11(a)(i) and (ii)	•		-	0	00			0 00	
(b)	Political Party Committees	_				,				
(c)	Other Political Committees					00			0 00	
	(such as PACs)			,	0	00			0 00	
(d)	Total Contributions (add Lines									
1	11(a)(iii), (b), and (c)) (Carry									
	Totals to Line 33, page 5)	•								
2. Tran	sfers From Affiliated/Other									
Part	y Committees			-						
3. All L	cans Received		•							
4. Loai	n Repayments Received									
	ets To Operating Expenditures			•			:	•	'	
	funds, Rebates, etc.)									
	rry Totals to Line 37, page 5)	**								
	ands of Contributions Made			`						
to F	ederal Candidates and Other									
Polit	tical Committees									
7. Othe	er Federal Receipts									
(Div	idends, Interest, etc.)									
8. Tran	isfers from Non-Federal and Levin F	unds								
(a) l	Non-Federal Account									
	(from Schedule H3)		•							
(b)	Levin Funds (from Schedule H5)									
(c)	Total Transfers (add 18(a) and 18(b)).	:		0	00			0 00	
	el Receipts (add Lines 11(d),	_			Λ	00			o o	
12.	13, 14, 15, 16, 17, and 18(c))	-	'n	•	0	00			0 0	
	al Federal Receipts					00			0.0	
(sut	stract Line 18(c) from Line 19)	>			0	00			0 - 0	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	Total This Period		
21.	Operating Expenditures:		Calendar Year-to-Date	
	(a) Allocated Federal/Non-Federal Activity (from Schedule H4)	0.00	A AA	
	(I) Federal Share	0 00	0 00	
	,, , = = 1.11	0.00	0.00	
	(ii) Non-Federal Share	0.00	0,00	
	(b) Other Federal Operating	115 00	115 00	
	Expenditures	115 00	115 00	
	(c) Total Operating Expenditures			
	(add 21(a)(i), (a)(ii), and (b))	115,00	115 00	
2.	Transfers to Affiliated/Other Party			
_	Committees		, ,	
3.	Contributions to Federal Candidates/Committees	0 00	0 00	
	and Other Political Committees	0 00	, , 0 00	
4.	Independent Expenditures			
_	(use Schedule E)		•	
5.	Coordinated Party Expenditures (2 U.S.C. §441a(d))			
	(use Schedule F)			
5.	Loan Repayments Made	1 :		
7.		reconstruction of the second		
₽.	Refunds of Contributions To: (a) Individuals/Persons Other			
	Than Political Committees			
	(b) Political Party Committees			
	(c) Other Political Committees			
	(such as PACs)	1	•	
	(d) Total Contribution Refunds			
	(add Lines 28(a), (b), and (c))			
	tong times toler (a); and (a);			
9	Other Disbursements	0 00	0.00	
٠.			•	
O.	Federal Election Activity (2 U.S.C. §431(20))			
	(a) Allocated Federal Election Activity			
	(from Schedule H6)			
	(i) Federal Share		,	
		•		
	(ii) "Levin" Share			
	(b) Federal Election Activity Paid Entirely			
	With Federal Funds			
	(c) Total Federal Election Activity (add	,		
	Lines 30(a)(i), 30(a)(ii) and 30(b))		•	
٦.	Total Disbursements (add Lines 21(c), 22,	115 00	115 00	
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	115 00	115 00	
2.	Total Federal Disbursements			
	(subtract Line 21(a)(ii) and Line 30(a)(ii)			
	from Line 31)	115 00	115 00	

DETAILED SUMMARY PAGE

of Disbursements

	FEC Form 3X (Rev. 02/2003)			Page 5			
	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period		COLUMN 8 Calendar Year-to-Date			
33 .	Total Contributions (other than loans) (from Line 11(d), page 3)	. 0	00	. 0	00		
34.	Total Contribution Refunds (from Line 28(d))	, 0	00	. 0	00		
95.	Net Contributions (other than loans) (subtract Line 33 from Line 32)	0	00	. 0	00		
36 .	Total Federal Operating Expenditures (add Line 21(a)(l) and Line 21(b))	, 115	00	115	00		
7.	Offsets to Operating Expenditures (from Line 15, page 3)	, , 0	00	0	00		
38.	Net Operating Expenditures (subtract Line 36 from Line 35)	, 115	00	115	00		

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(1)
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<u>اب.</u>
(*\}

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1 OF 1									
(check only one)									
X 11a	115	11e	12						
13	14	15	16	<u> </u>					

	Detailed Summary Page	13 14 15 16 11
		ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (in Full) Life And Liberty PAC		
Full Name (Last, First, Middle Initial)	Date of Classical	
Mailing Address		Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	0 00
Name of Employer	Occupation	<u> </u>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)	Date of Receipt	
Mailing Address		
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)	<u> </u>	Date of Benefit
Mailing Address	•	Date of Receipt
City	State Zip Code	
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Oate ▼	
SUBTOTAL of Receipts This Page (antion	al}	0 00
	mber only)	0.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only X 21b		23 2		DF 2
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	_			-	_	
NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·	-				
Life And Liberty PAC						
Full Name (Last, First, Middle Initial)			Data of Di			
A. Wachovia Bank NA				sbursement		
Mailing Address PO Box 563966			01	10	2007	
City S Charlotte, NC 28262	State Zip Code					
Purpose of Disbursement Ronk Charges		001	Amount of	Each Disbur	remont this	Pariod
Bank Charges Candidate Name		Category/	Датовги ог	Each Dispor		
N/A		Туре			5	00
N/A President X	nent For: Primary General Other (specify) ▼ Non-El	lection				
State: District: Full Name (Last, First, Middle Initial)			· · · ·	, -		
B. Wachovia Bank NA			Date of Di	sbursement		
Mailing Address PO Box 563966	<u> </u>	· ·	02	09	2007	
City S Charlotte, NC 28262	State Zip Code			~		
Purpose of Disbursement Bank Charges		001	Amount of	Each Disbut	sement this	Period
Candidate Name N/A		Category/ Type			5	00
Office Sought: House Disburser	nent For:					
NI/A	Primary General Other (specify) ▼					
Full Name (Last. First, Middle Initial) C. Wachovia Bank NA		•	Date of Di	sbursement	•	
Mailing Address PO Box 563966			03	09	2007	
	State Zip Code					
Purpose of Disbursement		001				
Bank Charges Candidate Name	· · · · · · · · · · · · · · · · · · ·	Category/	Amount of	Each Disbu		
N/A		Type			5	00
INT AL .	nent For: Primary General Other (specify) ▼					
State: District:						
SUBTOTAL of Disbursements This Page (optional)		<u> </u>			. 15	00
TOTAL This Period (last page this line number only)	,,	.				

SCHEDILLE B. (EEC Form 3Y)

SCHEDOLE B (FEC FOILI 3X)	Use separate schedule(s)			.anen only	ADMHER	€:		l. <u>-</u> -	AUE 2		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	Į (G	X	21b 27	22		23 29b	24	25 29		26 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			ny	perso	n for the	pul	pose (of solicit	ing centril	butions	
NAME OF COMMITTEE (In Full)											
Life And Liberty PAC											
Full Name (Last, First, Middle Initial)											
A. Office of Tax and Revenue					Date 4	of D	seruda	ment			
Mailing Address PO Box 601					03		0	!	2007		
City Sashington, DC 20044	itate Zip Code										
Purpose of Disbursement Income Tax		00	1		Amou	m ol	Each	Diabura	ement thi	s Period	j
Candidate Name N/A		Caste Ty	gory pe	<i>y1</i>					100	00	
ONITAL .	nent For: Primary General Other (specify) ▼ Non-E	lecti	on								
Full Name (Last. First, Middle Initial) B.	•				Date	of D	isburse	ement			
Mailing Address	n 				,						
City	State Zip Code										
Purpose of Disbursement					Amou	nt of	Each	Disburs	ement thi	s Perios	đ
Candidate Name		Cate Ty	gorj pe	yi							
· !	nent For: Primary General Other (specify) ♥		<u> </u>								
State: District:											
Full Name (Last, First, Middle Initial) C.					Date	of D	isbure	ment			
Mailing Address											
City	≋ate Zip Code		• •								
Purpose of Disbursement					Amou	nt o	f Each	Disburs	ement thi	s Period	d
Candidate Name		Cate Ty	gor; pe	y/			:				
	nent For: Primary General Other (specify) ♥										
SUBTOTAL of Disbursements This Page (optional)				•					100	00	
TOTAL This Period (last page this line number only)		••••		•					11:	5 00	

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1

		Detailed Summary Page	FOR LINE 13 OF FORM 3X
AME OF COMMITTEE (In Full)		•	
Life And Liberty PAC			
LOAN SOURCE Full Name (Last, First, Mic	ddie Initial)		Election:
N/A			Primary General
Mailing Address			Other (specify) ▼
City	State ZIP Co	de	
Original Amount of Loan	Cumulative Payment To		nce Outstanding at Close of This Period
, , ,		,	
TERMS Date Incurred	Date Due	Interest Rate	Secured:
			% (apr) Yes No
List All Endorsers or Guarantors (if any)	to Loan Source		
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	<u></u>
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address	•	Occupation	<u>. </u>
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Malling Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer	········
Mailing Address		Occupation	
		Amount	···· - · · · · · · · · · · · · · · · ·
City State	ZIP Code	Guaranteed Outstanding:	A Company of the Comp
1			
UBTOTALS This Period This Page (optional)		.	. 0 00
OTALS This Period (last page in this line onl	y)	>	. 0 00
Carry outstanding balance only to LINE 3, So	hedule D, for this line. If	no Schedule D, carry forw	vard to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)	HEDULE D (FEC Form 3X)		
DEBTS AND OBLIGATIONS		(Use separate schedule(s)	FOR LINE NUMBER:
Excluding Loans	1	for each numbered line)	(check only one) 9 X 10
NAME OF COMMITTEE (In Full)			I A 0
Life And Liberty PAC			
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of I	Debt (Purpose):
N/A			
Mailing Address			
City State	Zip Code		
Outstanding Balance Beginning This Period		l	
Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of This Period
	•		
B. Full Name (Lest, First, Middle Initial) of Debtor (or Craditor	Nature of f	Debt (Purpose):
Mailing Address	····		
City State	Zip Code		
Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of This Period
	•		
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of	Debt (Purpose):
Mailing Address			
City	State Zip Code		!
Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstand	ling Balance at Close of This Period
	•	o o caraca	
· · · · · · · · · · · · · · · · · · ·	<u> </u>		<u></u>
1) SUBTOTALS This Period This Page (optional)		<u> •</u>	0 00
2) TOTALS This Period (last page this line number of	only)	<u>. •</u>	0 00
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page only)	. •	0 00
4) ADD 2) and 3) and carry forward to appropriate in	ine of Summary Page (last page on	ly) ►	0 00



CO-CHAIR

PHILMORE ANDERSON
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LOU & LIZ CORDIA
THE HON. CHARLES W. DENT
THE HON. DAVID DREIER
THE HON. VITO FOSSELLA
JOHN GIOLA

ROBERT J. GOULD
MICHAEL GOVAN
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THE HON, CANDICE MILLER
THE HON, SUSAN MOLINARI
THE HON, DEVIN NUNES

The Hon. Pete Sessions

Amb. Peter & Diane Terpeluk

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CARL THORSEN
ANDREW TICHENOR
MARK VALENTE III
RICHARD WHITE
LINDSEY WILLIAMS
DAVID WOODRUFF

CORDIALLY INVITE YOU TO ATTEND A RECEPTION

HONORING

RUDOLPH W. GIULIANI

TO BENEFIT THE RUDY GIULIANI PRESIDENTIAL EXPLORATORY COMMITTEE

At the Home of Ambassador Peter & Diane Terpeluk 3815 Bradley Lane Chevy Chase, Maryland 20815

THURSDAY, MARCH 22, 2007

6:30 PM Private Reception with Photo Opportunity \$2,300 per Person - \$4,600 per Couple 7:00 PM General Reception - Remarks and Q & A \$1,000 per Person

BUSINESS ATTIRE • REPLY CARD ENCLOSED

FOR MORE INFORMATION CONTACT: Carli Mugford • Phone: 804.344.8081 • Fax: 804.344-0092 • carlimugford@bandfllc.com

Rudy	Giuliani Presidential	Explorat	ory Committee Re	ply Form			
Yes! Rudy can count on me/us participating at the following level:							
Co-Chairs - raise \$25,000, 8 guests to the Private Reception with special recognition. Number attending							
Host - raise \$10,000, 4 guests to the Private Reception with special recognition. Number attending							
Private Reception with Photo Opportunity, \$2,300 per person (\$4,600 per couple) \$ Number attending							
	General Reception \$1,000 per person (\$2,000 per couple) \$ Number attending I/We are unable to attend however enclosed is my/ner contribution in the amount of \$						
Please make check(s) payable to: "Rudy Giuliani Presidential Exploratory Committee, Inc."							
Attention: Carli Mugford							
101 East Cary Street							
Richmond, Virginia 23219							
Phone: (804) 344-8081 • Fax: (804) 344-0092 • E-Mail: carlimugford@bandfile.com							
	Kindly use reply envelope enclos		• •				
	us to obtain and report the name,		, <u>-</u>				
-	ibutions aggregate in excess of \$	_	•	remployer for tack in-			
	Middle		•				
Address		_City	ST	Zip			
Home #	Cell #		Work #				
Fax#	Email	EmailEmail					
Employer	Occ	Occupation					
Spouse Name	Spouse's En	tail	. <u> </u>				
	the Rudy Giuliani Presidential Ex- rsonal funds and is not drawn on Signature		*				
See reverse side for spouse contribution and credit card information.							
Solicitor: Cordia	Tracking#: 850			Event Code: EDC01			

				<u> </u>			
Spouse Contributor Information for Joint Contributions							
Name Prefix	First	Middle:		Last	_		
Nickname			Ноп	Last me #	_		
Work #	<u> </u>						
Employer	Occupation:						
If this com	ribution is inter	ded to be a contribution from	<u> 1 а соні</u>	ple, signature of spouse must be provided,			
	Signatu	re					
Credit Card I	nformationCr	edit Card: (check one)			<u> </u>		
	ÖVisa □N	IasterCard 🖰 American 1	Express	s □Discover			
Card Number					_		
					_		
Cardholder Nam	ne						
		ore					
occupation, and emcontribute is \$2,300 \$2,300 is designated	not deductible for ployer for contrib per election, with I for the primary s	federal income tax purposes. For actions that aggregate in excess of the primary and general election and any additional amount is design	ederal El of \$200 in ms treated mated for	dection Law requires us to report the name, add in an election cycle. The maximum an individual of separately. As a result, any initial contribution us the general, up to a total of \$4600 per person. A consentence. Federal multi-candidate PACs may contribution.	may upto upte		

Paid for by Rudy Giuliani Presidential Exploratory Committee, Inc. www.joinrudy2008.com

\$5,000 for the primary and \$5,000 for the general. Contributions from corporations, labor organizations, federal government contractors,

and foreign nationals without permanent residency status ("green cards") are prohibited.

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING D The FEC added this page to the end of this filing to indicate he	•
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation	ation™ Label
USPS Express Mail	Postmarked
Postmark illegible	· · · · · · · · · · · · · · · · · · ·
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ceipt or Postmarked
2-	4/9/07
PREPARER (3/2005)	DATE PREPARED